

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
			10/10/00
FEE DETERMINATION	Mr. G		
O.I.P.E. CLASSIFIER		48	10/18/00
FORMALITY REVIEW	NF	5855	11-13-00
RESPONSE FORMALITY REVIEW	2 Rev	5851	04/06/01

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	6-30-03
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
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15	✓
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39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
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Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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